

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09/368,852		FILING DATE 8/05/99	
							APPLICANT(S)			
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	
1	1		1				51			
2		1					52			
3		2					53			
4		1					54			
5		1					55			
6		5					56			
7		3					57			
8		7					58			
9		1					59			
10		2					60			
11	1		1				61			
12							62			
13							63			
14							64			
15							65			
16							66			
17							67			
18							68			
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38							88			
39							89			
40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	2		2				TOTAL IND.			
TOTAL DEP.	23		9				TOTAL DEP.			
TOTAL CLAIMS	25		11				TOTAL CLAIMS			